

CITY OF BRIDGEPORT

REQUEST FOR COURSE ENROLLMENT FORM

EMPLOYEE NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ EMPLOYEE JOB TITLE: \_\_\_\_\_

I am enrolled in the (CIRCLE ONE – Associate, Bachelor, Masters, Doctorate) Degree Program, with a major of \_\_\_\_\_ and am requesting to enroll in the following courses at \_\_\_\_\_ University or College.

EMPLOYEE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

COURSE TITLE:	NUMBER OF CREDITS	TUITION COST AND *BOOKS/FEES	APPROXIMATE TOTAL COST

The courses listed above are designed to increase my proficiency in my present work assignment by (please provide a narrative):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
.....

DEPARTMENT HEAD/IMMEDIATE SUPERVISOR

DATE

- APPROVED
- DENIED

DIRECTOR OF LABOR RELATIONS

DATE

- APPROVED
- DENIED

\*\*\*\*\*

Once course(s) are completed, submit all appropriate documents with the satisfactory grade (refer to your union contract), along with TUITION REIMBURSEMENT FORM. Please be advised, that tuition is available on a first come, first serve basis. \*Books/fees reimbursement, per bargaining unit contract.

**CITY OF BRIDGEPORT**

**REQUEST FOR TUITION REIMBURSEMENT**

Employee Name: \_\_\_\_\_

Department: \_\_\_\_\_ Date: \_\_\_\_\_

Major: \_\_\_\_\_

<b>Course Title</b>	<b>No. Credits</b>	<b>Unit Cost</b>	<b>Book Cost</b>	<b>Total</b>

All appropriate paperwork must be attached.

Attachments:

Class Type:

**Course Enrollment Form**

Graduate

**Grade/Course Verification**  
(Original Transcript)

Undergraduate

Approved:

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Labor Relations Director